## **2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N38355** 1. Entity Name POSITIVE AFRICAN-AMERICAN ROLE MODELS, INC. Principal Place of Business Mailing Address 1895 N.W. 75TH STREET 1895 NW 75TH STREET MIAMI FL 33147. MIAMI FL 33147 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 65-0343052 Zip Country Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) WEATHERSPOON, HENRY 1895 NW 75 ST 2100 NW 80 ST City MIAMI FL 33147 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing After September 13, 2002, \$5.00 May Be Trust Fund Contribution. min. will be \$236.25. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE PT ☐ Delete NAME WEATHERSPOON, HENRY

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NAME STREET ADDRESS 2100 NW 80TH ST

MIAMI FL

RICH, EARL

610 NW 10 ST

**MIAMI FL 33136** 

CLINSCALES, D.

OWENS, SHERMAN

**MIAMI FL 33142** 

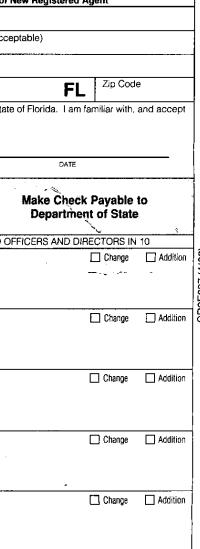
PEMBROKE PINES FL 33028

5400 NW 22ND AVE -ROOM 305

810 NW 28 ST

FILED Sep 08, 2002 8:00 am Secretary of State

09-08-2002 90051 023 \*\*\*\*61.25



☐ Change

☐ Addition

Applied For

\$8.75 Additional

Fee Required

Not Applicable

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if an address, with all other like empowered. changed, or on an attachment with

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